

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>5/19/00</i>
O.I.P.E. CLASSIFIER			<i>EDH</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>6494</i>	<i>4-3</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

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Best Available Copy

If more than 150 claims or 10 actions
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